



STATE OF WASHINGTON  
APPLICATION TO ENTER A WATER RIGHT INTO  
THE TRUST WATER RIGHT PROGRAM

NOTE: THIS FORM IS ONLY TO BE USED FOR THE  
ACQUISITION OF WATER INTO THE TRUST WATER RIGHT PROGRAM

(Check all that apply.)

- ☐ Lease  
☐ Purchase  
☒ Donation  
☐ Other

Explain: Temporary donation 2020 expiration

☐ Portion of the identified existing water right

IF FOR SEASONAL OR TEMPORARY, START DATE 1/1/13  
END DATE 12/31/20

FOR OFFICE USE ONLY	
FILE No. <u>CS4-00991569</u>	WRIA <u>39</u>
DATE ACCEPTED <u>02/04/2013</u>	BY <u>[Signature]</u>
FEE \$ <u>0</u>	REC'D <u>01/28/2013</u>
CHECK No. <u>[Signature]</u>	
SEPA: <input type="checkbox"/> Exempt <input type="checkbox"/> Not exempt	

\*\*IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)\*\*

1. Applicant Information:

APPLICANT/BUSINESS NAME <u>SK Ranch</u>	PHONE NO. <u>509 968-3484</u>	FAX NO. ( )
ADDRESS <u>12141 Fairview Rd</u>		
CITY <u>Ellensburg</u>	STATE <u>Wa</u>	ZIP CODE <u>98926</u>
CONTACT NAME (IF DIFFERENT FROM ABOVE) <u>Sam Kayser</u>	PHONE NO. ( ) <u>same</u>	FAX NO. ( )
ADDRESS <u>same</u>		
CITY	STATE	

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER <u>0091</u>	RECORDED NAME(S) <u>SK Ranch</u>
DO YOU OWN THE RIGHT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	IF NO, PROVIDE OWNER(S) NAME and ADDRESS:
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
ARE WATER DIVERSIONS/WITHDRAWALS OF THIS WATER RIGHT METERED OR MEASURED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IMPORTANT! PROVIDE INFORMATION SHOWING THE EXTENT OF WATER USE FOR EACH OF THE LAST FIVE YEARS <u>donated 2009</u>	

40 54-84216-J  
Previous donation  
CS4-00991C TCL 569  
expired 10/15/10  
12/31/0987

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

COURT CLAIM 00991 SUB 9 WILSON-NADBEUM 06-30-1872	FOR OFFICE USE ONLY CFD = <u>54-84216-J</u>
WATER RIGHT NO. _____	FILE (contract) NO. _____
<u>CS4-00991569</u>	

### 3. How is Water to be Made Available for Trust?

<input type="checkbox"/> Alteration in method of diversion	<input type="checkbox"/> Alteration in water use/ irrigated acreage
<input type="checkbox"/> Alteration in method of delivery/conveyance	<input type="checkbox"/> Nonuse of one or more points of diversion
<input type="checkbox"/> Alteration in method of water application	<input checked="" type="checkbox"/> Nonuse of all or a portion of the named water right
<input type="checkbox"/> Alteration in type of crop	<input type="checkbox"/> Other, Explain below:
Name of funding source(s):	

### WATER RIGHT DESCRIPTION \*

#### 4. Point(s) of Diversion/Withdrawal:

##### A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Nanewm Creek		SE	NW	16	18	19		

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

#### 5. Purpose of Use:

##### A. Existing Use of the Water Right

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
was donated in 2009 to trust		1200	

##### B. Proposed Purpose of the Trust Water Right:

DESCRIBE THE PURPOSE(S) OF USE DURING THE PERIOD OF TRUST:	
PURPOSE OF USE	ACRE-FEET/YR
in stream	1200

#### 6. Place of Use:

##### A. Existing:

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
stream							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							

\* If additional space is needed, please continue on the form: Attachment for Application to Enter a Water Right into the Trust Water Right Program.

### 3. How is Water to be Made Available for Trust?

<input type="checkbox"/> Alteration in method of diversion	<input type="checkbox"/> Alteration in water use/ irrigated acreage
<input type="checkbox"/> Alteration in method of delivery/conveyance	<input type="checkbox"/> Nonuse of one or more points of diversion
<input type="checkbox"/> Alteration in method of water application	<input checked="" type="checkbox"/> Nonuse of all or a portion of the named water right
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stream							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
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6. Place of Use (continued)

B. Proposed:

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED

7. Remarks and Other Relevant Information:


Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

8. Signatures:

*I certify that the information above is true and accurate to the best of my knowledge. I hereby grant staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.*

Mark "Sam" Kayser  
 (Applicant)

SK 1, 14, 13  
 (Date)

SK Ranch  
 (Water Right Holder)

SK 1, 14, 13  
 (Date)

(Land Owner(s) of Existing Place of Use)

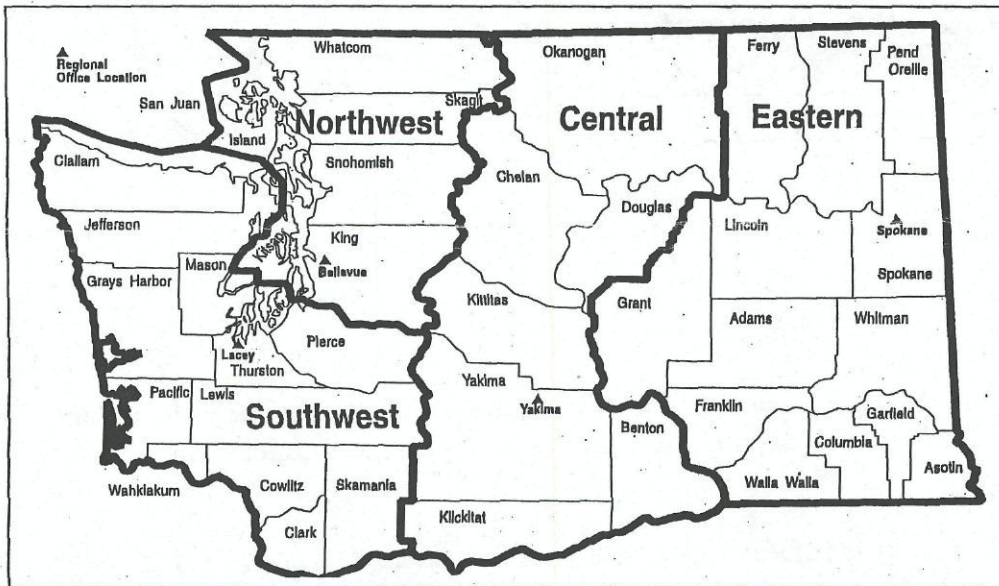
(Date)

**IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.**

<b>WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):</b>	
<input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED	<input type="checkbox"/> SECTION _____ IS INCOMPLETE
<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____	DATE: ____/____/____

## IMPORTANT!

Submit your application to Ecology at the regional office for the area of proposed or existing water use. Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Department of Ecology  
Central Regional Office  
15 W. Yakima Avenue, Suite 200  
Yakima, WA 98902-3452  
Telephone: (509) 575-2490

Department of Ecology  
Eastern Regional Office  
N. 4601 Monroe, Suite 202  
Spokane, WA 99205-1295  
Telephone: (509) 329-3400

Department of Ecology  
Northwest Regional Office  
3190 - 160<sup>th</sup> Avenue SE  
Bellevue, WA 98008-5452  
Telephone: (425) 649-7000

Department of Ecology  
Southwest Regional Office  
PO Box 47775  
Olympia, WA 98504-7775  
Telephone: (360) 407-6300

If you need assistance in the application process or those needing this application in an alternate format, please call the Water Resources Program at (360) 407-6600 or 800-833-6388 (TTY).